	- State/Territory: WASHINGTON
	Premiums Imposed on Low Income Pregnant Women and Infants
Α.	The following method is used to determine the monthly premium imposed optional categorically needy pregnant women and infants covered under section $1902(a)(10)(A)(ii)(IX)(A)$ and (B) of the Act:
	NONE
	A description of the billing method used is as follows (include due dat for premium payment, notification of the consequences of nonpayment, an notice of procedures for requesting waiver of premium payment):
	NONE
*De	scription provided on attachment.
TN	No. 91.32
TN Sup	No. 9/22 ersedes Approval Date 1/21/92 Effective Date 1/1/91
TN Sup	No. 9/22 ersedes Approval Date 1/21/92 Effective Date 1/1/91
TN Sup	No. 9/22 ersedes Approval Date 1/21/92 Effective Date 1/1/1

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Rev	vision:	HCFA-PM AUGUST 1	(-91-4 ( 991	BPD)		ATTACHMEN Page 2 OMB No.:		
	_	STATE	PLAN UNDE	R TITLE X	IX OF THE	SOCIAL SECU	RITY ACT	•
		State/Te	erritory:	WASHI	NGTON			
c.	State	or local	funds und	ler other	programs	are used to	pay for prem	niums:
		Yes		<i></i>	No			
					N/A			
D.	a prem	iteria u ium beca bed belo	use it wou	termining ild cause	whether an undue	the agency w hardship on	ill waive pa an individua	yment o
					N/A	4		
	-							
								:
*De	scripti	on provi	ded on att	achment.	•			
Sup	No ersedes No	#/	proval Dat	e <u>1/21</u>	142		ate	[://
						HCFA ID: 7	986E	